## ISSUE SLIP STAPLE AREA (for additional cross references)

ISSUE SEIF STATE				
		INITIALS	ID NO.	DATE
	POSITION			2 30
-	FEE DETERMINATION	Jug	1	4-10-00
t	OLP E. CLASSIFIER	BL	7/427	4-18-00
1	FORMALITY REVIEW RESPONSE FORMALITY REVIEW		-	
	RESPONSE PORTING			

## INDEX OF CLAIMS

INDEX OF	,	Non-elected
Rejected Allowed (Through numeral). Canceled Restricted	1	Non-elected Interference Appeal Objected

(Through numeral)		Objected	
— (Through numera)	House	Claim Date	_
2.00	Claim Date		
Claim M. Date		Pinal	_
a a a a	Final	101	_
Final (1) Original	51	1002	_
	52	1003	_
24	53	104	_
3 1 1	54	108	
	55	106	
5 1	56	108	-
6 7	58	109	+
18117	59	110	+
1917	60	++-   1111     ++++++	+
	61	112	I ·
	62	113	
13	64	1116	+
14	65	116	+
15	66		+
16	67	118	H
171111111111111	68	119	17
18	69		T
19	70	121	Π.,
20	1 四十十十二	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HH "
21	72	124	++1
22	174	125	++1
24	75	126	++1
691	76	+++++++	
26		128	14
27	78	1 1 1 1 1 1 1 1	+
28	80	131	H
30	1 181	132	+++
31	82	133	+11
132	83	134	
33	84	135	$\Box$
34	85	137	HH
35	87	138	+++
36	88	139	+++
38	89	140	+++1
39	90	1111	+++1
40	91	1111 1143 111111	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	92	++++	TH
EV I	93	144	$\exists +$
1012	94	1 1 1 1 1 1	+++
W 19 11 11	1 95 1 1 1	111111111111111111111111111111111111111	+++
7 45	96	148	+++
46	998	149	$++\pm$
4/48	199	hsa l	
46 47 48 49 50	100		1.
50		40 actions	

If more than 150 claims or 10 actions staple additional sheet here

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Best Available Copy